

Tennessee Chronic Pain Guidelines At a Glance

A. Key Principles When Considering Prescribing Opioids

- Use short-acting opioids
- Do not use methadone for pain
- Do not use oral/sublingual buprenorphine
- Avoid benzodiazepines with opioids
- Buprenorphine/naloxone combinations only for addiction

B. Initiating Opioid Therapy

- Begin with a therapeutic trial
- Begin with lowest dose; titrate to effect
- Obtain informed consent prior to treatment
- Obtain written treatment agreement prior to prescribing
 - o Policy on early refills/lost prescriptions
 - o Safe storage of medication
 - Use of one pharmacy
 - o Periodic/random drug tests
 - Periodic/random pill counts
 - Neonatal Abstinence Syndrome prevention/education
 - Reasons for discontinuing opioid treatment
 - Reasons for patient dismissal
- Not obligated to continue opioid therapy that has been initiated by another provider—need to justify; "if you write it you own it"
- Monitor for abuse, misuse or diversion

C. Women's Health

- Discuss methods to prevent unintended pregnancy
- Obtain patient signature documenting education regarding risks and benefits of opioid treatment during pregnancy
- Obtain pregnancy test prior to initiation of opioids
- Document form of birth control at each visit
- Recommend long acting reversible contraceptive
- Refer pregnant patients to high risk obstetrician

^{*}Document any deviation from guidelines in medical record.

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